

Work Order ID 87724

July-27-12 12:29:46 PM

**\*87724\***

Page 1

Item ID: D3764-1

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: Back Leg Fitting

Start Date: 7/27/12

Start Qty: 10.00

**\*10\***

Cust Item ID:

Required Date: 8/17/12

Req'd Qty: 10.00

**\*10\***

Customer:

Reference:

Run Start

**\*NR1\***

Approvals:

Process Plan: MLJDate: 12/07/27 Tooling:

Date:

Stop

**\*NR2\***

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

Draw Nbr

Revision Nbr

D3764

Rev B

100

0.00

**\*100\***

BAND SAW

Bandsaw

Memo

0.00

Jeaspa Bandsaw

Cut blank 2.95" long

F.K. 12/08/14

10

0

PTO

110

0.00

**\*110\***

HAAS CNC VERTICAL MACHINING #1

HAAS 1

Memo

0.00

HAAS CNC vertical machine #1

1- Mill as per Folio FA741 Rev: B & Dwg D3764 Rev: B 2-Deburr  
per dwg D3764

F.K. 12/08/15

10

1

120

0.00

**\*120\***

QC2- Inspect parts off machine FAI/FAIB

QC

Memo

0.00

Quality Control

F.K. 12/08/15

10

1

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: AWH Date: 12/08/12QA Closed: TC Date: 8/22/2012

Work Order: <u>87724</u> Part No. <u>D3764-1</u> NCR No. <u>12-1743</u>				<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b> <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input checked="" type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
---	--	--	--	--	--	--	--	--	--	--	--

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
<input checked="" type="checkbox"/> Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved	12/08/14	110	1	The feed for the bore 1.010" was too high, therefore it caused some vibration.	(DAS 16 8-33) Q57012 12/08/12	Folio got modified.  Scrap and replace <u>B 119231</u>	[Signature] 12-08-12 [Signature]	[Signature] 12/08/12	(DAS 16 8-33) Q57012 12/08/12

FAULT CATEGORY			
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input checked="" type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

# Work Order ID 87724

**\*87724\***

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Item ID: D3764-1 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Back Leg Fitting  
 Start Date: 7/27/12 Start Qty: 10.00 **\*10\*** Cust Item ID:  
 Required Date: 8/17/12 Req'd Qty: 10.00 **\*10\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 <b>*130*</b> QC Quality Control	QC8- Inspect parts - second check  Memo	0.00  0.00	<i>29 12-8-16</i>			<i>10</i>	<i>0</i>		
140 <b>*140*</b> HandFinish Hand Finishing	Chemical Conversion Coat per QSI005 4.1  Memo	0.00  0.00				<i>10</i>	<i>0</i>	<i>12-8-20</i>	
150 <b>*150*</b> QC Quality Control	QC3- Inspect Part Finish  Memo	0.00  0.00				<i>10X</i>	<i>0</i>	<i>12/08/20</i>	<i>M/f</i>

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		

# Work Order ID 87724

**\*87724\***

Page 3

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Item ID: D3764-1 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Back Leg Fitting  
 Start Date: 7/27/12 Start Qty: 10.00 **\*10\*** Cust Item ID:  
 Required Date: 8/17/12 Req'd Qty: 10.00 **\*10\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160	Identify as per dwg & Stock Location <b>250A</b>	0.00							
<b>*160*</b>									
Packaging	Memo	0.00							
Packaging									
170	QC21- Final Inspection - Work Order Release	0.00							
<b>*170*</b>									
QC	Memo	0.00							
Quality Control									

*Handwritten:* 10  
 12/08/20

*Handwritten:* MLS 12/08/21

*Handwritten:* MLS 12/08/20

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Picklist Print

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Page 1

Work Order ID: 87724

Parent Item: D3764-1

Parent Item Name: Back Leg Fitting

Start Date: 7/27/12

Required Date: 8/17/12

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP Rev:A New Issue 08-05-01 JLM Verified By:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M6061T6B1.500X02.000 6061-T6 Bar 1.50 x 2.00		Purchased	No			100	f	24.3407	0.25	2.631579			

Location	Loc Qty	Loc Code
MAT004	12.34068	
114608	0.05768	
117933	1.862	
119231	10.421	
MAT010	12	
122521	12	

~~2.893~~

FK 12/08/14

~~1.862~~

~~1.862~~

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

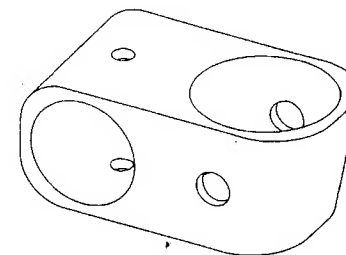
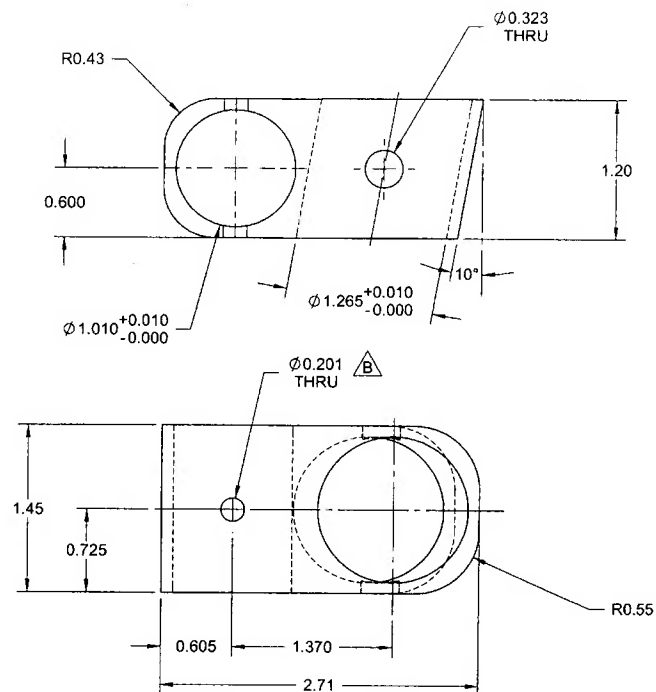
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other







SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER

NO. 87724 MCT  
12/07/27

**D3764-1 BACK LEG FITTING**

**NOTES:**

- 1) MATERIAL: 6061-T6 (OR 6061-T651/T6510/T6511/T62) ALUMINUM BAR PER AMS-QQ-A-225/8 (OR AMS 4117/4128/4115/4116) PER AMS-QQ-A-200/8 (OR AMS 4160) (REF. DART SPEC. M6061T6B)
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.13 lbs

B	CHANGE HOLE SIZE TO 0.201	HS	08.06.10
A	NEW ISSUE	HS	08.06.04
REV.	DESCRIPTION	BY	DATE
DESIGN	HS		
DRAWN	HS		
CHECKED	HS		
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	08.06.10		

**DART AEROSPACE LTD**  
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D3764** REV. B  
SHEET 1 OF 1

TITLE **BACK LEG FITTING** SCALE NTS

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